

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>S</i>		
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	NP	588	9-17-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 -+..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	4/17/01
2	✓	✓	6/17/01
3	✓	✓	12/17/01
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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